## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Londrigan, Betsy, Dirksen, ,								
	o) Address (number and street)				Candidate's FEC Identification Number H8IL13150				
	(c) City, State, and ZIP Code						ew Amend	ded	
	Springfield		IL	6271	2	Statement (N	I) <b>OR</b> (A)		
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candidate			
	DEMOCRATIC PARTY	House			IL	13			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
Betsy Dirksen Londrigan for Congress									
	(b) Address (number and street)								
	PO Box 275								
	(c) City, State, and ZIP Code								
	Springfield				IL	62705			
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DESIGNATION OF OTHER AUTHORIZED COMMITTEES									
(Including Joint Fundraising Representatives)									
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full)									
(h) Address (number and street)									
(b) Address (number and street)									
(c) City, State, and ZIP Code									
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		mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct	and complete.		
	gnature of Candidate					Date		•	
Lo	ondrigan, Betsy, Dirksen, ,			[Elec	tronically Filed]	07/06/2017			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)